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## BIB DATA SHEET

CONFIRMATION NO. 7545

<b>SERIAL NUMBER</b> 10/624,234	<b>FILING or 371(c) DATE</b> 07/21/2003 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> 53693-11001		
<b>APPLICANTS</b> Stephen Ritland, Flagstaff, AZ; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b> 10/21/2003						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /DAVID C COMSTOCK/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> AZ	<b>SHEETS DRAWINGS</b> 9	<b>TOTAL CLAIMS</b> <del>25</del> 13	<b>INDEPENDENT CLAIMS</b> <del>3</del> 4
<b>ADDRESS</b> HOLME ROBERTS & OWEN LLP 1700 LINCOLN STREET, SUITE 4100 DENVER, CO 80203 UNITED STATES						
<b>TITLE</b> Surgical image tracker mounting base apparatus and method of use						
<b>FILING FEE RECEIVED</b> 735	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			

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